PTO/SB/47 (09-06) Approved for use through 04/30/2009. OMB 0651-0016
U.S. Patent and Trademark Office: U. S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

"FEE ADDRESS" INDICATION FORM

Address to: Mail Stop M Correspondence Commissioner for Patents - OR -	Fax to: 571-273-6500
P.O. Box 1450 Alexandria, VA 22313-1450	
Alexandra, VA 22010-1400	
INSTRUCTIONS: The issue fee must have been paid for application(s) listed on this form. In addition, only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be established when correspondence related to maintenance fees should be mailed to a different address than the correspondence address for the application. When to check the first box below: If you have a Customer Number to represent the fee address. When to check the second box below: If you have no Customer Number representing the desired fee address, in which case a completed Request for Customer Number (PTO/SB/125) must be attached to this form. For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.	
For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:	
Customer Number: 23370	
OR	
The attached Request for Customer Number (PTO/SB/125) form.	
PATENT NUMBER (if known)	APPLICATION NUMBER
	10544273
O that the back	
Completed by (check one): Applicant/Inventor	Signature
Attorney or Agent of record 58352	Eric G. Zaiser
(Reg. No.)	Typed or printed name
Assignee of record of the entire interest. See 37 CFR Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	3.71. 404-815-6500 Requester's telephone number
Assignee recorded at Reel Frame	May 5, 2009
	Date
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below.	
* Total offorms are submitted.	
This collection of information is required by 37 CFR 1.363. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 5 minutes to complete.	

to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 5 minutes to complete, including gathering, preparing, and summitting the completed application from the bit w917D. Time will way depending upon the initialists access, Any comments on the amount of time you require to complete this form and/or suggestions for reducing the leading, should be sent to the Chief Information Officer, U.S. Fatent and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandrix, VA 2231-1450, DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop M Correspondence, Commissioner for Patient, P.O. Box 1450, Alexandrix, VA 2231-1450.

If you meet assistance in completing the form, and 17-000-077-0999 and select option 2.